

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
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2009 JUL 16 AM 8:47

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

MOTORCYCLE PAC OF MINNESOTA

ADDRESS (number and street) 7160 WILLOW VIEW CIRCLE

Check if different than previously reported. (ACC) CHANHASSEN MN 55317

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C00402768

3. IS THIS REPORT ☒ NEW (N) OR ☐ AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)  
☐ July 15 Quarterly Report (Q2)  
☐ October 15 Quarterly Report (Q3)  
☐ January 31 Year-End Report (YE)  
☒ July 31 Mid-Year Report (Non-election Year Only) (MY)  
☐ Termination Report (TER)

- (b) Monthly Report Due On: ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11) (Non-Election Year Only)  
☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12) (Non-Election Year Only)  
☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)  
☐ Convention (12C) ☐ Special (12S)

Election on M M / D D / Y Y Y Y in the State of

- (d) 30-Day POST-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 01 / 01 / 2009 through 06 / 30 / 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer MARIC SENN

Signature of Treasurer Date 07 / 08 / 2009

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only

**FEC FORM 3X**  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Motorcycle PAC of Minnesota

Report Covering the Period:

From:

MM / DD / YYYY  
01 / 01 / 2009

To:

MM / DD / YYYY  
06 / 30 / 2009

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

6. (a) Cash on Hand  
January 1, 2009

2009

32,566.69

- (b) Cash on Hand at  
Beginning of Reporting Period.....

32,566.69

- (c) Total Receipts (from Line 19) .....

59,344.55

59,344.55

- (d) Subtotal (add Lines 6(b) and  
6(c) for Column A and Lines  
6(a) and 6(c) for Column B) .....

91,911.44

91,911.44

7. Total Disbursements (from Line 31) .....

58,006.55

58,006.55

8. Cash on Hand at Close of  
Reporting Period  
(subtract Line 7 from Line 6(d)) .....

33,904.89

33,904.89

9. Debts and Obligations Owed TO  
the Committee (Itemize all on  
Schedule C and/or Schedule D) .....

10. Debts and Obligations Owed BY  
the Committee (Itemize all on  
Schedule C and/or Schedule D) .....

☐ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

DETAILED SUMMARY PAGE  
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

MOTORCYCLE PAC OF MINNESOTA

Report Covering the Period:

From:

MM / DD / YYYY  
01 / 01 / 2009

To:

MM / DD / YYYY  
06 / 30 / 2009

I. Receipts

COLUMN A  
Total This Period

COLUMN B  
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

(ii) Unitemized.....

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

(b) Political Party Committees.....

(c) Other Political Committees

(such as PACs).....

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5).....▶

12. Transfers From Affiliated/Other

Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

17. Other Federal Receipts

(Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)).....▶

20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

593435

593435

593435

593435

593435

593435

593435

593435

593435

593435

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

## **II. Disbursements**

**COLUMN A**  
**Total This Period**

**COLUMN B**  
**Calendar Year-to-Date**

21. Operating Expenditures:  
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)  
(i) Federal Share .....



- (ii) Non-Federal Share.....



- (b) Other Federal Operating Expenditures .....



- (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....



22. Transfers to Affiliated/Other Party Committees.....



23. Contributions to Federal Candidates/Committees and Other Political Committees.....



24. Independent Expenditures (use Schedule E) .....



25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....



26. Loan Repayments Made.....



27. Loans Made.....



28. Refunds of Contributions To:  
(a) Individuals/Persons Other Than Political Committees .....



- (b) Political Party Committees .....



- (c) Other Political Committees (such as PACs).....



- (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....



29. Other Disbursements .....



30. Federal Election Activity (2 U.S.C. §431(20))

- (a) Allocated Federal Election Activity (from Schedule H6)

- (i) Federal Share .....



- (ii) "Levin" Share.....



- (b) Federal Election Activity Paid Entirely With Federal Funds .....



- (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....



31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..



32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....

DETAILED SUMMARY PAGE  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/  
Operating Expenditures

COLUMN A  
Total This Period

COLUMN B  
Calendar Year-to-Date

33. Total Contributions (other than loans)  
(from Line 11(d), page 3) .....
34. Total Contribution Refunds  
(from Line 28(d)) .....
35. Net Contributions (other than loans)  
(subtract Line 34 from Line 33) .....
36. Total Federal Operating Expenditures  
(add Line 21(a)(i) and Line 21(b)) ..... ►
37. Offsets to Operating Expenditures  
(from Line 15, page 3) .....
38. Net Operating Expenditures  
(subtract Line 37 from Line 36) ..... ►

593435

593435

29030120213

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:  
 (check only one)

PAGE OF

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MOTORCYCLE PAC OF MINNESOTA**

Full Name (Last, First, Middle Initial)

A.

Date of Disbursement

**KLINE FOR CONGRESS**

MM/DD/YYYY  
 04/16/2009

Mailing Address

**101 WEST BURNSVILLE PKWY STE 104**

City

State

Zip Code

**BURNSVILLE, MN**

**55337**

Purpose of Disbursement

**CONTRIBUTION TO CANDIDATE**

011

Candidate Name

**JOHN KLINE**

Category/  
Type

Amount of Each Disbursement this Period

1,000.00

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☒ Other (specify) ▼

State: **MN**

District:

**NON ELECTION YEAR**

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

**PETERSON FOR CONGRESS**

MM/DD/YYYY  
 02/19/2009

Mailing Address

**PO BOX 265**

City

State

Zip Code

**DETROIT LAKES**

**MN 56502**

Purpose of Disbursement

**CONTRIBUTION TO CANDIDATE**

011

Candidate Name

**COLLIN PETERSON**

Category/  
Type

Amount of Each Disbursement this Period

2,000.00

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☒ Other (specify) ▼

State: **MN**

District:

**NON ELECTION YEAR**

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

MM/DD/YYYY

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....

3,000.00

TOTAL This Period (last page this line number only).....

29030120214

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 2

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**Motorcycle PAC OF MINNESOTA**

Full Name (Last, First, Middle Initial)

A. **MINNESOTA HOUSE DFL CAUCUS**

Mailing Address

**255 EAST PLATO BLVD**

City

**ST. PAUL**

State

**MN**

Zip Code

**55107**

Purpose of Disbursement

**CONTRIBUTION**

Candidate Name

**011**  
Category/  
Type

Date of Disbursement

**01 / 05 / 2009**

Amount of Each Disbursement this Period

**2,000.00**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

B. Full Name (Last, First, Middle Initial)

**ABATE OF MINNESOTA PRODUCTS**

Mailing Address

**76550 - 226TH AVENUE NW**

City

**ELK RIVER**

State

**MN**

Zip Code

**55330**

Purpose of Disbursement

**SUPPLIES**

Candidate Name

**001**  
Category/  
Type

Date of Disbursement

**01 / 20 / 2009**

Amount of Each Disbursement this Period

**150.00**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

C. Full Name (Last, First, Middle Initial)

**HOLIDAY INN**

Mailing Address

**5637 HWY 29 SOUTH**

City

**ALEXANDRIA**

State

**MN**

Zip Code

**56308**

Purpose of Disbursement

**TRAVEL - HOTEL**

Candidate Name

**002**  
Category/  
Type

Date of Disbursement

**02 / 18 / 2009**

Amount of Each Disbursement this Period

**109.45**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

**2,259.45**

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE **2** OF **2**

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**MOTORCYCLE PAC OF MINNESOTA**

Full Name (Last, First, Middle Initial)

A.

Date of Disbursement

MM/DD/YYYY  
**03/25/2009**

**NORTHWEST AIRLINES**

Mailing Address

**MPLS**

**MN**

**S**

City

State

Zip Code

Purpose of Disbursement

**TRAVEL - AIRFARE**

Candidate Name

**002**

Category/  
Type

Amount of Each Disbursement this Period

**279.20**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

B.

Date of Disbursement

MM/DD/YYYY  
**04/24/2009**

**LIAISON CAPITOL**

Mailing Address

**415 NEW JERSEY AVE NW**

City

State

Zip Code

**WASHINGTON D.C.**

**20001**

Purpose of Disbursement

**TRAVEL - HOTEL**

Candidate Name

**002**

Category/  
Type

Amount of Each Disbursement this Period

**262.00**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

C.

Date of Disbursement

MM/DD/YYYY

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

**541.20**

**5800.65**



Federal Election Commission  
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<input type="checkbox"/> No Postmark	
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ED

PREPARER  
(3/2005)

7/16/09

DATE PREPARED

29030120217